

Owner: _____

This form is set up per unit. If you have more units than what is provided below; please make copies and mail them back to our office within the time allotted:

Tenant Information

Address of Rental: _____
Millville, New Jersey 08332

Unit #: _____

Occupants:

Name (First, Last)

Birthdate

1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____

Address of Rental: _____
Millville, New Jersey 08332

Unit #: _____

Occupants:

Name (First, Last)

Birthdate

1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____

Address of Rental: _____
Millville, New Jersey 08332

Unit #: _____

Occupants:

Name (First, Last)

Birthdate

1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____

Address of Rental: _____
Millville, New Jersey 08332

Unit #: _____

Occupants:

Name (First, Last)

Birthdate

1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____